

A00000000828

Florida Department of State
Division of Corporations
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MERGER OR SHARE EXCHANGE

Roy's/Westcoast-I, Limited Partnership

Certificate of Status	1
Certified Copy	1
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May 4, 2007

FLORIDA DEPARTMENT OF STATE

Division of Corporations

ROY'S/WESTCOAST-I, LIMITED PARTNERSHIP
2202 NORTH WESTSHORE BLVD., 5TH FLOOR
TAMPA, FL 33607

SUBJECT: ROY'S/WESTCOAST-I, LIMITED PARTNERSHIP
REF: A00000000828

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Due to transmission problems, your faxed document or coversheet is illegible or incomplete. Please refax the document and cover sheet to this office for processing.

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Marsha Thomas
Document Specialist

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Attached is a form to file a Certificate of Merger pursuant to section 620.2108, Florida Statutes. This form is basic and may not meet all merger needs. The advice of an attorney is recommended.

Filing Fee: \$52.50 for each party

Certified Copy (optional): \$52.50

Send one check in the total amount payable to the Florida Department of State.

Please include a cover letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

Mailing Address

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Street Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

For further information, you may contact the Registration Section at (850) 245-6051.

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Roy's/Westcoast-I, Limited Partnership
(Name of Surviving Party)

The enclosed Certificate of Merger and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Elyannah Hernandez

(Contact Person)

OSI Restaurant Partners, Inc.

(Firm/Company)

2202 N West Shore Blvd., 5th Floor

(Address)

Tampa, FL 33607

(City, State and Zip Code)

For further information concerning this matter, please call:

Elyannah Hernandez

(Name of Contact Person)

at (813) 282-1225

(Area Code and Daytime Telephone Number)

☒ Certified copy (optional) \$52.50

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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**Certificate of Merger
For
Florida Limited Partnership or Limited Liability Limited Partnership**

The following Certificate of Merger is submitted in accordance with s. 620.2108, Florida Statutes.

FIRST: The exact name, form/entity type, and jurisdiction for each merging party are as follows:

<u>Name</u>	<u>Jurisdiction</u>	<u>Form/Entity Type</u>
RO-1, LLC	HI	LLC
_____	_____	_____
_____	_____	_____
_____	_____	_____

SECOND: The exact name, form/entity type, and jurisdiction of the surviving party are as follows:

<u>Name</u>	<u>Jurisdiction</u>	<u>Form/Entity Type</u>
Roy's/Westcoast-I, Limited Partnership	FL	Limited Partnership

THIRD: The date the merger is effective under the governing laws of the surviving party is: 05/08/2007.

(NOTE: If survivor is a Florida limited partnership or limited liability limited partnership, effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State. If survivor is not a Florida limited partnership or limited liability limited partnership, effective date shall be as provided in survivor's governing statute.)

FOURTH: The merger was approved by each party as required by its governing law.

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FIFTH: If the surviving party is a foreign organization not qualified to transact business in this state, the street address and mailing address of an office which the Florida Department of State may use for the purposes of s. 620.2109(2), F.S., are as follows:

Street address:

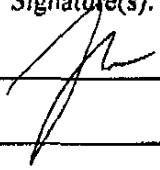
Mailing address:

SIXTH: Other provisions, if any, relating to the merger:

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SEVENTH: Signature(s) for Each Party:

(Merger must be signed by all general partners of Florida limited partnerships or limited liability limited partnerships and by the authorized representative of each other party.)

Name of Entity/Organization:	Signature(s):	Typed or Printed Name of Individual:
Roy's/Outback Joint Venture		Joseph J Kadow.,
		Exec. VP & Secretary

Fees: Filing Fees: \$52.50 Per Party
 Certified Copy: \$52.50 (Optional)
 Certificate of Status: \$8.75 (Optional)

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